PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/821,678			ing Date 08/2004	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN
Н	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
П	BASIC FEE (37 CFR 1.16(a), (b), (-	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)
┢	SEARCH FEE	or (c))	N/A		N/A		N/A		1	N/A	
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), (FAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ł	x s =			x s =	
(37	CFR 1.16(h))	If the		ation and drawin	gs exceed 100	ı			ł		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is \$2 addit	sheets of paper, the application size t is \$250 (\$125 for small entity) for eac additional 50 sheets or fraction thereo 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL	
	APPI	OED - PART II	OTHER THAN SMALL ENTITY OR SMALL ENTITY								
Н	CLAIMS			HIGHEST		1 1				r	
AMENDMENT	08/03/2007	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	· 17	Minus	 20	= 0]	X \$25 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 5	Minus	 -3	= 2]	X \$100 =	200	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	200	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus		=	1	x \$ =		OR	x \$ =	
N	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x \$ =	
ä	Application Size Fee (37 CFR 1.16(s))]]		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
Γ									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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